

Connecticut Health Insurance Exchange Health Plan Benefits and Qualifications Advisory Committee **SPECIAL MEETING MINUTES**

Location: Conference Call
Public Access: Legislative Office Building
450 Capitol Avenue, Room 2A, Hartford, CT
Date: Tuesday, June 19, 2012
Time: 9:00 a.m.

Members Present by Telephone

Anne Melissa Dowling, (Co-Chair), Connecticut Insurance Department (CID); Mark Espinosa, (Co-Chair), United Food and Commercial Worker's Union 919; Jennifer Jaff, Advocacy for Patient's with Chronic Illness; Gloria Powell for Commissioner Jewel Mullen, Department of Public Health; Kevin Gavin, Small Business for a Healthy CT; Deirdre Hardrick, Aetna; Robert Tessier, CT Coalition of Taft-Hartley Health Funds; Thomas Marchozzi, Hartford Healthcare; Marcia Petrillo, Qualidigm; Mary Ellen Breault, CID; Mary Fox

Other Participants

Julie Lyons, CT Health Insurance Exchange (HIX); Bob Carey, RLCarey Consulting

Meeting Facilitator

Nellie O'Gara, HES Advisors

Members Absent

Joseph Treadwell, Connecticut Podiatric Medical Association; Dr. Robert McLean, Connecticut State Medical Society; Margherita Guiliano, CT Pharmacists Association; Stephen Frayne, Connecticut Hospital Association

I. Call to Order and Introductions

Co-Chair Anne Melissa Dowling opened the meeting at 9:00 a.m. Committee members and staff introduced themselves.

II. Follow-up to June 8 Meeting

Nellie O'Gara provided an outline of the meeting agenda. Mr. Carey walked the committee through the materials which had been provided to the members prior to the meeting. A memo regarding plan information, premium cost and plan limits had been distributed, as well as additional detail regarding annual, lifetime, and condition benefit limits.

Discussion took place regarding whether the rest of the packages are roughly the same and whether there is anything that would distinguish or quantify what the cost differentials are, as affordability and cost are two critical issues. Bob Carey responded no—there is not much difference other than lifetime limits on a particular benefit; there is no answer to dollar value. Mary Ellen Breault indicated that an actuary examined the differential and there is no data. Additional information is being gathered with regard to utilization.

Chairperson Dowling thanked staff for the additional information, stating that at some point an executive decision will need to be made using the existing data.

Discussion occurred with regard to eliminating the State plan due to the unlimited visits, which will create a higher premium, affecting affordability. Members discussed the notion of eliminating the Oxford PPO plan because of its lifetime limits. The committee discussed the concerns with affordability if the State plan is selected.

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The suggestion was also made to request the Exchange or CID have a conversation with Anthem regarding the comparison between its small business HMO to the FEHBA. Mary Ellen Breault indicated that additional data had been requested of a plan but it has not been offered and does not have full credible information; there are some issues as to the accuracy of the data. Bob Tessier suggested obtaining from Anthem a sense of how the different costs of the plans are based on the eight benefits. Jennifer Jaff noted that pricing of a HMO is going to differ from a POS which allows out of network providers. The committee further discussed cost sharing and affordability as a serious issue and consideration.

Public Comment:

The following individuals participated in the public comment period: Greg Williams, Connecticut Turning to Youth and Families and Vicki Veltri, Office of the State Healthcare Advocate.

Discussion turned to the difference between behavioral health therapy and cognitive therapy and whether carriers can provide a definition. Julie Lyons was requested to provide information in response to this.

Members continued to debate the plans. Jennifer Jaff made a motion to eliminate the design as currently carried by Oxford. The motion was seconded by Bob Tessier. Ms. O’Gara conducted a roll call vote. Results as follows.

Roll call vote to eliminate Oxford

Anne Melissa Dowling	Yes
Deirdre Hardrick	Yes
Gloria Powell	Yes
Jennifer Jaff	Yes
Kevin Galvin	Yes
Marcia Petrillo	Yes
Maria Diaz	Yes
Mark Espinosa	Yes
Mary Ellen Breault	Yes
Mary Fox	Yes
Robert Tessier	Yes
Thomas Marchozzi	Yes

A motion was made by Deirdre Hardrick to eliminate the State employee health plan. The motion was seconded by Marcia Petrillo. Ms. O’Gara conducted a roll call vote. Results as follows:

Roll call vote to eliminate State employee health plan

Anne Melissa Dowling	Yes
Deirdre Hardrick	Yes
Gloria Powell	No
Jennifer Jaff	No
Kevin Galvin	No
Marcia Petrillo	Yes
Maria Diaz	No
Mark Espinosa	No
Mary Ellen Breault	Yes
Mary Fox	Yes
Robert Tessier	No
Thomas Marchozzi	Yes

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Discussion took place as to proceed without further data. Committee agreed to address further questions with regard to premiums based on guidelines and quality and affordability to Julie Lyons.

The committee focused its attention around elimination of the Aetna plan with concerns being voiced about the behavioral health benefits. Ms. Jaff made a motion to eliminate Aetna. Robert Tessier seconded the motion. Ms. O’Gara conducted a roll call vote. Results as follows:

Roll call vote to eliminate Aetna

Anne Melissa Dowling	N
Deirdre Hardrick	N
Jennifer Jaff	Y
Kevin Galvin	Y
Maria Diaz	N
Mark Espinosa	N
Mary Ellen Breault	N
Mary Fox	N
Rob Tessier	Y

Bob Tessier dismissed himself from the meeting at 10:17 a.m.

III. Next Steps

The committee requested a second meeting be scheduled after submitting further questions to Staff.

IV. Adjournment

Meeting adjourned at 10:21 a.m.

Resources

[Memo](#)

[Exhibit 1: Analysis of EHB Benchmark Plans](#)

[Exhibit 3: Summary Analysis of EHB Benchmark Plans](#)

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*The next scheduled meeting of the Health Plan Benefits and Qualifications Advisory Committee will be held
on Wednesday, July 11, 2012 at 9:00a.m.*